Reviewer's report

Title: Evaluating vision-related quality of life in preoperative cataract patients and analyzing its influencing factors in China: a cross-sectional study

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Reviewer: Haidong Zou

Reviewer's report:

The authors used the Chinese language version NEI-VFQ-25 to describe the vision-related quality of life change in cataract patients. In general, the results are interesting. However, as noted below there are some major points which need clarification.

I suggest a major revision of this manuscript, subject to the authors' responding to the points raised below.

As English is not the first language of the authors, I strongly recommend that a native English writer be asked to review the grammar and syntax of the revised paper before resubmission.

The points that need attention are as follows:

1. The formation of original NEI-VFQ-25 LVQOL and the Chinese language version should both be cited in the first part.

2. Has the Chinese language NEI-VFQ-25 been reviewed for culture adaption in the China mainland? Hong Kong and Shenyang are not culturally equivalent. I would strongly suggest a review committee including doctors, nurses, patients, and healthy subjects to adapt the questionnaire before this study.

3. For the interview method, does the authors mean that it was administered by an interviewer? Is this how it designed to be administered, or is it intended for self-completion in those whose vision is less severely impaired?

4. A major question is about the visual acuity perimeter used in this manuscript: why the authors used best corrected visual acuity (BCVA) instead of Presenting or daily living visual acuity? Only if all the subjects enrolled wear the proper glasses (far-sight and near-sight), the BCBA will be considered relating to their daily vision function.

5. The authors tested convergent item validity and item discriminant validity, and I will suggest they test more criteria values, such as test-retest reliability and item internal consistency. References should be given for all the criteria values used in assessments.

6. I would say the authors evaluated mostly on the vision impairment, but not on cataract. Different eye diseases, such as age-related macular degeneration, corneal diseases will result in the similar BCVA impairment. A “know-group” comparison would provide adequate information about specific cataract related quality of life impairment, and that is strongly suggested.
7. Mean scores have been presented without any information provided regarding the distributions of scores. Are the scores at all time points distributed normally? Typically, questionnaire scores do not follow Gaussian distributions, so that means and standard deviations are not good summary measures. If they prefer to focus on the scores rather than changes in the scores, then medians and ranges (or interquartile ranges) may be more appropriate summary measures unless they can state that all distributions are Gaussian or nearly so.

8. The results section mentions a comparison of scores by age, educational status, marital status, etc. Were there any prior hypotheses (e.g. based on the original Chinese language version NEI-VFQ-25) regarding the nature, magnitude and direction of the relationship between NEI-VFQ-25 scores and these demographic variables? If a difference was expected, but not found, would this be a matter of concern regarding validity and/or discriminatory power?

9. In the discussion of the logistic regression analyses, it was unclear whether individual independent variables were evaluated first in univariate models and those results used to select variables to be included in multivariate models or whether only multivariate models were used.

Level of interest: An article of limited interest

Quality of written English: Not suitable for publication unless extensively edited

Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.